APPLICATION DATA SHEET

ELLE SULLE S

Application Information

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	METHOD AND APPARATUS FOR THE APPLICATION OF POWDER MATERIAL TO SUBSTRATES
Attorney Docket Number::	1000035-000072
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	12
Small Entity?::	No

Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	Simon
Middle Name::	
Family Name::	TULLETT
Name Suffix::	
City of Residence::	Gamlingay
State or Province of Residence::	Sandy
Country of Residence::	United Kingdom
Street of Mailing Address::	Offa Cottage, 2 Chapel Field
City of Mailing Address::	Gamlingay
State or Province of Mailing Address::	Sandy
Country of Mailing Address::	United Kingdom

Postal or Zip Code of Mailing

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SG19 3QP

Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	Adrian
Middle Name::	
Family Name::	JARVIS
Name Suffix::	
City of Residence::	St Neots
State or Province of Residence::	Cambs
Country of Residence::	United Kingdom
Street of Mailing Address::	3 Milton Avenue Eaton Ford
City of Mailing Address::	St Neots
State or Province of Mailing Address::	Cambs
Country of Mailing Address::	United Kingdom
Postal or Zip Code of Mailing Address::	PE19 7LH
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	David
Middle Name::	
Family Name::	BILLINGTON

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Name Suffix:: City of Residence:: Wellingborough State or Province of Residence:: Northamptonshire Country of Residence:: **United Kingdom** 19 Moreton Avenue Street of Mailing Address:: City of Mailing Address:: Wellingborough State or Province of Mailing Northamptonshire Address:: Country of Mailing Address:: **United Kingdom** Postal or Zip Code of Mailing NN8 2JE Address:: **Applicant Authority Type:**: Inventor Primary Citizenship Country:: **United Kingdom** Status:: **Full Capacity** Russell Given Name:: Middle Name:: **KING** Family Name:: Name Suffix:: City of Residence:: Irthlingborough State or Province of Residence:: **Northants** Country of Residence:: United Kingdom Street of Mailing Address:: 138 Finedon Road City of Mailing Address:: Irthilingborough

State or Province of Mailing

Address::

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Northants

Country of Mailing Address::	United Kingdom
Postal or Zip Code of Mailing Address::	NN9 5UB
Applicant Authority Type::	inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	David
Middle Name::	
Family Name::	GLEDHILL
Name Suffix::	
City of Residence::	Dry Drayton
State or Province of Residence::	Cambs
Country of Residence::	United Kingdom
Street of Mailing Address::	16 Scotland Farm Cottages
City of Mailing Address::	Dry Drayton
State or Province of Mailing Address::	Cambs
Country of Mailing Address::	United Kingdom
Postal or Zip Code of Mailing Address::	CB3 8BN
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	Paul
Middle Name::	

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Family Name:: **WILLSHER** Name Suffix:: City of Residence:: Royston State or Province of Residence:: Herts Country of Residence:: **United Kingdom** Street of Mailing Address:: 27 Layston Park City of Mailing Address:: Royston State or Province of Mailing Herts Address:: Country of Mailing Address:: **United Kingdom** Postal or Zip Code of Mailing **SG8 9DS** Address:: **Applicant Authority Type:**: Inventor **Primary Citizenship Country:: United Kingdom** Full Capacity Status:: Given Name:: Michael Middle Name:: John Family Name:: **HOLROYD** Name Suffix:: City of Residence:: **Great Shelford** State or Province of Residence:: Cambridge Country of Residence:: **United Kingdom** Street of Mailing Address:: 11 Headley Cardens

City of Mailing Address::

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Great Shelford

State or Province of Mailing

Address::

Cambridge

Country of Mailing Address::

United Kingdom

Postal or Zip Code of Mailing

CB2 5JZ

Address::

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing

Date::

This Application National Stage of PCT/GB2004/005458 12/30/04

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority

Claimed::

Great Britain 0330171.0 12/30/03 Yes

Assignee Information

Assignee Name:: PHOQUS PHARMACEUTICALS LIMITED

Street of Mailing Address: 10 Kings Hill Avenue, Kings Hill

City of Mailing Address:: West Malling

State or Province of Mailing

Address::

Kent

Country of Mailing Address:: United Kingdom

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Postal or Zip Code of Mailing Address::

ME19 4PQ

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